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E. W. HARRIS
4-3-01

CHANGE OF CORRESPONDENCE ADDRESS Application

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

Application Number	09/557252
Filing Date	4/23/2000
First Named Inventor	JUSTIN PAGE
Group Art Unit	2173
Examiner Name	
Attorney Docket Number	

Please change the Correspondence Address for the above-identified application to:

☐ Customer Number
Type Customer Number here

Place Customer
Number Bar Code
Label here

OR

<input checked="" type="checkbox"/> Firm or Individual Name	JUSTIN PAGE				
Address	C/O PRIVACY PROTECTION LTD.				
Address	1500 HARBOR BOULEVARD				
City	WEEHAWKEN	State	NJ	ZIP	07087
Country	USA				
Telephone	201-866-8055	Fax	201-866-8059		

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

- ☒ Applicant/Inventor.
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☐ Attorney or Agent of record.
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Initials: JP

RECEIVED
MAR 19 2001
TC 2100 MAILROOM
MAR 21 2001
STATUS INQUIRY
RECEIVED
TC 2100 CSO

Typed or Printed Name	JUSTIN PAGE
Signature	
Date	3/12/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.